

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

or Fax (703) 746-4000

JUL 25 2005

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All other correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

31665 7590 06/16/2005

**PATENT DEPARTMENT
MACROVISION CORPORATION
2830 DE LA CRUZ BLVD.
SANTA CLARA, CA 95050**

07/26/2005 RMEBRAH1 00000117 130762 09993600

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:8004 30.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Barbara Skliha	(Depositor's name)
Barbara Skliha	(Signature)
7/22/05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/993,600	11/27/2001	Eyal Shavit	216589US2	865

TITLE OF INVENTION: DYNAMIC COPY PROTECTION OF OPTICAL MEDIA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	09/16/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BROWN, CHRISTOPHER J	2134	380-201000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<input checked="" type="checkbox"/> James H. Salter <input checked="" type="checkbox"/> George B. Almeida <input type="checkbox"/> 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Macrovision Europe Limited

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Maidenhead, United Kingdom

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee

Publication Fee (No small entity discount permitted)

Advance Order - # of Copies 10

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

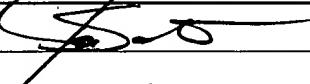
The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-0762 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature 

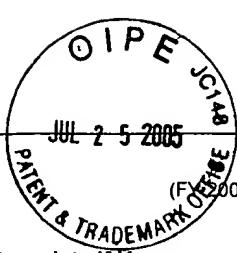
Date 7/21/05

Typed or printed name James H. Salter

Registration No. 35,668

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FEE TRANSMITTAL FOR FY 2005

(FY 2005 Begins 10/01/2004. Fee changes made on 11/22/04 and 12/08/04 are included.)

TOTAL AMOUNT OF PAYMENT (\$) 1,730.00

Complete if Known:

Application No. 09/993,600
 Filing Date November 27, 2001
 First Named Inventor Eyal Shavit
 Examiner Name Christopher J. Brown
 Art Unit 2134
 Attorney Docket No. MID3

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None
 Deposit Account
 Deposit Account Number : 13-0762

X The Director is Authorized to do the following with respect to the above-identified Deposit Account:

- X Charge fee(s) indicated below.
- X Credit any overpayments.
- X Charge any additional fees during the pendency of this application.
- X Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
- Charge fee(s) indicated below except for the filing fee

FEE CALCULATION

1A. BASIC FILING FEE/SEARCH FEE/EXAMINATION FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee	Fee	Fee	
Code	Code	Fee (\$)	
1011	300	2011 150	Utility application filing fee } 1,000/500*
1111	500	2111 250	Utility search fee }
1311	200	2311 100	Utility examination fee }
1012	200	2012 100	Design application filing fee }
1112	100	2112 50	Design search fee }
1312	130	2312 65	Design examination fee }
1013	200	2013 100	Plant filing fee }
1113	300	2113 150	Plant search fee }
1313	160	2313 80	Plant examination fee }
1004	300	2004 150	Reissue filing fee }
1114	500	2114 250	Reissue search fee }
1314	600	2314 300	Reissue examination fee }
1005	200	2005 100	Provisional application filing fee }
SUBTOTAL (1)			\$ 0

* List the filing, search, and examination fees separately, but pay concurrently.

1B. APPLICATION SIZE FEE

				<u>Extra Sheets</u>	<u>Fee from</u> <u>below</u>	<u>Fee paid</u>
Total Sheets	_____	- 100 =	_____	/50 =	_____ * X _____	_____ 0 _____
*(round up to integer)						
<u>Large Entity</u>	<u>Small Entity</u>					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		
1081	250	2081	125	Utility application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)		
1082	250	2082	125	Design application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)		
1083	250	2083	125	Plant application size fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)		
1084	250	2084	125	Reissue application fee for each additional group of 50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)		

SUBTOTAL (2) \$ 0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

				<u>Extra Claims</u>	<u>Fee from</u> <u>below</u>	<u>Fee Paid</u>
Total Claims	_____	- 20** =	_____	X	_____ =	_____
Independent Claims	_____	- 3** =	_____	X	_____ =	_____
Multiple Dependent	_____	_____	_____	_____	_____ =	_____

**Or number previously paid, if greater; For Reissues, see below.

				<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee</u>	<u>Fee Description</u>
Code	(\$)	Code	(\$)					Claims in excess of 20
1202	50	2202	25					Independent claims in excess of 3
1201	200	2201	100					Multiple dependent claim, if not paid
1203	360	2203	180					**Reissue independent claims over original patent
1204	200	2204	100					**Reissue claims in excess of 20 and over original patent
1205	50	2205	25					

SUBTOTAL (3) \$ 0

FEE CALCULATION (continued)

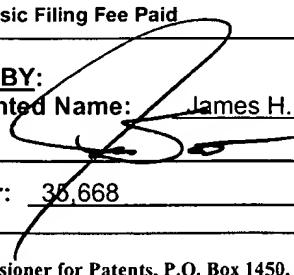
3. ADDITIONAL FEES

<u>Large Entity</u>		<u>Small Entity</u>			
Fee	Fee	Fee	Fee	<u>Fee Description</u>	<u>Fee Paid</u>
Code	(\$)	Code	(\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1813	8,800	1813	8,800	Request for inter parties reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	500	2452	250	Petition to revive – unavoidable	
1453	1,500	2453	750	Petition to revive - unintentional	
1501	1,400	2501	700	Utility issue fee (or reissue)	<u>1,400.00</u>
1502	800	2502	400	Design issue fee	
1503	1100	2503	550	Plant issue fee	
1464	130	1460	130	Petitions to the Commissioner (CFR 1.17(h) Group III)	
1463	200	1460	200	Petitions to the Commissioner (CFR 1.17(g) Group II)	
1462	400	1460	400	Petitions to the Commissioner (CFR 1.17(f) Group I)	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	For filing a submission after final rejection (see 37 CFR 1.129(a))	
1814	130	2814	65	Statutory Disclaimer	
1810	790	2810	395	For each additional invention to be examined (see 37 CFR 1.129(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	
1504	300	1504	300	Publication fee for early, voluntary, or normal pub.	<u>300.00</u>
1505	300	1505	300	Publication fee for republication	
1803	130	1803	130	Request for voluntary publication or republication	
1808	130	1808	130	Processing fee under 37 CFR 1.17(i) (except provisionals)	
1454	1,370	1454	1,370	Acceptance of unintentionally delayed claim for priority	
Other fee (specify)	<u>10 copies of patent @ \$3.00/copy</u>				<u>30.00</u>
Other fee (specify)					
				SUBTOTAL (4)	\$ <u>1,730.00</u>

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: James H. Salter

Signature: 

Date: 7/21/05

Reg. Number: 35,668

Telephone Number: (408) 562-8400

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450